IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit:

Examiner:

1797

M.E. Christian

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Masaru NAKATANI et al.

Serial No: 10/516,586 Confirmation No: 9941 Filed: August 8, 2005

For: Low Density Lipoprotein/Fibrinogen Adsorbent and Adsorption Apparatus Capable of Whole Blood Treatment

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following:

- Amendment.
- No additional fee is required.

The fee has been calculated as shown below:

| | (Col. 1) CLAIMS REMAINING AFTER AMENDMENT | | (Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | | (Col. 3) PRESENT EXTRA* | LG/SM \$ ENTITY FEE | | ADD'L FEE DUE | |
|--|---|-----|---|-----|-------------------------------|------------------------|-------|------------------|---|
| TOTAL CLAIMS FEE | 18 | -20 | 20 | | 0 | LG=\$52 SM=\$26 | \$52 | \$ | 0 |
| INDEPENDENT CLAIMS FEE | 1 | 'n | 3 | *** | 0 | LG=\$220 SM=\$195 | \$220 | \$ | 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$390 SMALL ENTITY FEE = \$195 | | | | | | | | | |
| ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) \$270 FOR EACH ADDITIONAL 50 SHEETS | | | | | | | | \$ | 0 |
| Independent Claims: 1 TOTAL | | | | | | | | | |

- " If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, write '20" in this space.
- "If the "Highest Number Previously Paid For" In THIS SPACE is less than 3, white 3' in this space. The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, white 3' in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.
- Please charge the amount of \$-0- to cover the additional claims fee to Deposit Account No. 50-1314.
- Please charge the amount of \$-0- to cover the extension fee to Deposit Account No. 50-1314.
- The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314.
 - Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
 - Any patent application processing fees under 37 C.F.R. § 1.17

Date: March 12, 2009

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Respectfully submitted, HOGAN HARTSON L.L.

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